

**U.S. Department of Justice
United States Marshals Service**

PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER CR No. 04-10066-MEL
DEFENDANT JAMIE EDELKIND		TYPE OF PROCESS Preliminary Order of Forfeiture
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
	Michael J. Liston, Esquire	
ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)		2 Park Plaza, Suite 610, Boston, MA 02116
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:		
Kristina E. Barclay, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, MA 02210		Number of process to be served with this Form - 285
		Number of parties to be served in this case
		Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please serve the attached Preliminary Order of Forfeiture upon the above named individual by certified mail, return receipt requested.

05-FBI-003262

LJT x3283

Signature of Attorney or other Originator requesting service on behalf of :	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
Kristina E. Barclay LJT		(617) 748-3100	June 30, 2005

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <u>38</u>	District to Serve No. <u>38</u>	Signature of Authorized USMS Deputy or Clerk <u>Mary M. May</u>	Date <u>7/13/05</u>
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).			
Name and title of individual served (If not shown above).	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.		
Address (complete only if different than shown above)	Date of Service <u>7/19/05</u>	Time am pm	
Signature of U.S. Marshal or Deputy <u>Mary M. May</u>			

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or	Amount of Refund
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REMARKS: 7/15/05 certified mail : 7004 1160 0001 5657 8425

7/18/05 - Date of Delivery

(6)